# MaineDOT

#### CONSULTANT CONTRACT STANDARD INVOICE

## Cost Plus Fixed Fee - Burdened Rate - Lump Sum

# WORKBOOK GUIDE

(Microsoft Excel 2002)

#### EACH INVOICE SUBMITTED MUST:

- 1. CONTAIN DATA FOR ONE CONTRACT ONLY, INCLUDING MULTI-PIN DETAIL AS APPROPRIATE.
- 2. CONTAIN A "CONSULTANT INVOICE NUMBER" THAT IS UNIQUE TO THAT FIRM AND CONTRACT WITH NO MORE THAN 12 CHARACTER FIELDS USED (including punctuation and spaces).
- 3. INCLUDE SHEET 4 OF 5, SUBCONSULTANT DBE/WBE DETAIL, EVEN IF TOTALS ARE ZERO.
- 4. INCLUDE THE SAME SUPPORTING INFORMATION ATTACHED TO THE INVOICE AS IN THE PAST.
- 1) Yellow and pink colored cells are for data entry. Yellow cells should only require data entry with the first invoice for a contract; pink cells will need review or update with each invoice submitted. Data for blue colored cells is derived by formula, or by link from another cell in the workbook.
- 2) It is suggested that you begin with <u>Sheet 2 of 5</u> Contract Data, adding Company and Contract information. Be sure to determine which "Yes/No" question in the upper left corner applies to your contract (Lump Sum contracts may have 2 yes answers). This determines which of the 3 Summary Sheets is filled with data (1Aof5, 1Bof5, 1Cof5). <u>Sheet 3 of 5</u>, Direct Labor Detail and <u>Sheet 4 of 5</u>, Sub consultant Detail should be self explanatory. Finally, <u>Sheet 5 of 5</u> breaks down invoice costs by MaineDOT PIN, including direct expense detail if appropriate. Totals from this Sheet are fed back to the appropriate Sheet 1; if they don't match direct labor and sub consultant data on Sheets 3 and 4 then an "Error" message appears.
- 3) Sheet 2 of 5, top right side, "Final Invoice?", must indicate either "yes" or "no" and should not be left blank. This not only aids processing, but also provides critical data for formulas and cells on other sheets.
- 4) The Workbook does not include an entry anywhere for Contract Fixed Fee. Sheet 2 of 5 Contract Data does require entry of the percentage of total contract fixed fee earned to date (% Complete To Date), in order to calculate the amount of fixed fee due on each invoice.
- 5) Overhead amounts are listed but not calculated by formula on **Sheet 2 of 5** Contract Data. This prevents rounding differences with local software programs. The cells are not protected, so formulas to calculate these values line by line can be inserted if desired.

# MaineDOT

### CONSULTANT CONTRACT STANDARD INVOICE

## Cost Plus Fixed Fee - Burdened Rate - Lump Sum

# WORKBOOK GUIDE - Continued

(Microsoft Excel 2002)

- 6) Sheet 3 of 5 does not require data for Lump Sum contracts unless you are submitting a final invoice.
- 7) Sheet 1C of 5 (Lump Sum) will show only a summary of labor, overhead and profit or lump sum costs with each invoice up to the final invoice. Final invoice submittal requires labor, overhead and profit breakdowns for the entire contract.
- 8) <u>All Sheets</u> are password protected, but **Sheet 3 of 5** does allow local sorting of fields such as name and PIN.
- 9) The MaineDOT PIN field is preformatted to produce an 8 digit number in decimal format. Do not enter a decimal point. The last 2 digits entered must be the 2 digits to the right of the decimal (even zeros), but no decimal should be shown. Do not enter leading zeros.
- 10) The payment address can be entered directly on Sheet 1 if it is different than the firm address entered on the Main Data Entry form.
- 11) Comment boxes have been added to a number of data entry fields to help clarify input intentions, or identify specific needs in those cells.
- 12) Function and Activity coding for PIN lines on Sheet 5 of 5 is not mandatory to submit a completed invoice, but should be entered if known, especially for multiPIN projects.

### Sheet 1A of 5

# **State of Maine Department of Transportation** Transportation Building 16 State House Station

Payment Type:	Transportation Building 16 State House S Augusta, Maine 04333-0016	Station	P.V. #: ENC/UENC #:
* Cost Plus Fixed Fee	•		CSN #:
	**In Account With**		Firm Federal I.D. #:
			TEDOCS #:
		<= Firm Name	Doc. Date:
	Street (PO Box)	<= Payment mailing	Doc. Type:
	Town, State ZIP	address	OUC:
	Firm Federal ID # =>		Author:
Consultant Invoice Number:			Invoice Date:
Invoice Period:			
Project Contract Number:		Consultant Project #	t:
Project Contract Award Date:		MaineDOT PIN	l:
Project Contract Completion Date:		Federal Project #	<del>t</del> :
		Project Name	e:
, ,			
Project Contract Number: Project Contract Award Date:	ature, (b) is unique to myself, (c) is capable of	MaineDOT PIN Federal Project #	l: t:

**Internal Use Only** 

Signed		/ре: <b>Name</b> ,	, Title		Amount Invoiced This Period	Total Amount Previously Invoiced	Cumulative Amount Invoiced To Date	Contract Amounts	Contract Balance
Straight Direct Labor = Straight Time Overhead =									
			Overtime Direct L						
			Overtime Over						
		Sub Total	Direct Labor + Over						
				d Fee =					
		Sı	ub-Total: DL + OH -						
	Direct	Expense	S (see Sheet 5 of 5 for	detail) =					
	Subconsultant S	-							
		Sub	p-Total: Subconsul	tants =	:				
			Total Invoice Amo	unts =	:				
	TOTAL AMOUN	T DUE 1	THIS INVOICE						
	Approved by:		Program/Project Ma	anager	Date	Reviewed by:		ntract Specialist	Date
		(Wor	k performed as specifie	d)			(Cleared fo	or processing)	

#### Sheet 1B of 5 Internal Use Only **State of Maine Department of Transportation Transportation Building 16 State House Station** P.V. #: Payment Type: Augusta, Maine 04333-0016 ENC/UENC #: \* Burdened Hourly Rate CSN #: Cost per Unit of Work \*\*In Account With\*\* Firm Federal I.D. #: TEDOCS #: <= Firm Name Doc. Date: Street (PO Box) <= Payment mailing Doc. Type: Town, State ZIP address OUC: Author: Firm Federal ID # => Consultant Invoice Number: **Invoice Date:** Invoice Period: **Project Contract Number:** Consultant Project #: **Project Contract Award Date:** MaineDOT PIN: Federal Project #: **Project Contract Completion Date:** Project Name: I hereby certify that the signature below is true and accurate. I further certify, if electronic, that it (a) is intended to have the same force as a manual signature, (b) is unique to myself, (c) is capable of verification, and (d) is under the sole control of myself. Initials: Cumulative Amount **Total Amount** Contract Signed: **Amount Invoiced Contract Amounts** Invoiced This Period Previously Invoiced **Balance** Please Type: Name, Title To Date Straight Direct Labor = Straight Time Overhead = Overtime Direct Labor = Overtime Overhead = Sub Total Direct Labor + Overhead = Profit = Sub-Total: DL + OH + Profit = **Direct Expenses** (see Sheet 5 of 5 for detail) = Subconsultant Summary: DBE/WBE => yes/no Sub-Total: Subconsultants = Total Invoice Amounts = TOTAL AMOUNT DUE THIS INVOICE Approved by: Reviewed by: MaineDOT Program/Project Manager MaineDOT Contract Specialist Date Date (Work performed as specified) (Cleared for processing)

#### Sheet 1E of 5 Internal Use Only State of Maine Department of Transportation **Transportation Building 16 State House Station** P.V. #: Payment Type: Augusta, Maine 04333-0016 ENC/UENC #: Lump Sum CSN #: \*\*In Account With\*' Firm Federal I.D. #: TEDOCS #: Doc. Date: <= Firm Name Street (PO Box) <= Payment mailing Doc. Type: Town, State ZIP OUC: Author: Firm Federal ID # => Consultant Invoice Number: Invoice Date: Invoice Period: **Project Contract Number:** Consultant Project #: **Project Contract Award Date:** MaineDOT PIN: **Project Contract Completion Date:** Federal Project #: Project Name: hereby certify that the signature below is true and accurate. I further certify, if electronic, that it (a) is intended to have the same force as a manual signature, (b) is unique to myself, (c) is capable of verification, and (d) is under the sole control of myself. Initials: Cumulative **Total Amount** Contract Amount Signed: **Amount Invoiced** Contract Amounts Invoiced This Period Previously Invoiced **Balance** Please Type: Name, Title To Date Lump Sum To Date (If not Final Invoice) = Final Invoice Detail: Straight Direct Labor = Straight Time Overhead = Overtime Direct Labor = Overtime Overhead = Sub Total Direct Labor + Overhead = Profit = Sub-Total: Lump Sum = **Direct Expenses** (see Sheet 5 of 5 for detail) = Subconsultant Summary: DBE/WBE => yes/no Sub-Total: Subconsultants = Total Invoice Amounts = **TOTAL AMOUNT DUE THIS INVOICE** Approved by: Reviewed by: MaineDOT Program/Project Manager MaineDOT Contract Specialist Date Date (Work performed as specified) (Cleared for processing)

### **Maine Department of Transportation**

Sheet 2 of 5

### Consultant Standard Invoice - Contract Data Entry Form

Contract Information

State Contract #

MaineDOT Contract Sequence # (CSN)

Consultant Project #

Cost Plus Fixed Fee (Yes/No)

Profit (Yes/No)

Lump Sum (Yes/No)

Lump Sum for Labor+OH+Profit ONLY (Yes/No)

Award Date mm/dd/yy

**Completion Date** 

mm/dd/yy

Current Invoice Information

Invoice Date =>
Consultant Invoice #
Invoice Start Date (mm/dd/yy)
Invoice End Date (mm/dd/yy)
% Complete To Date (FF or Lump Sum)

Consultant Project #: MaineDOT PIN: Federal Project #: Project Title/Location:

Final Invoice ? YES/NO =>

Company Information
Firm Name
Address
Address
Firm Federal ID #
Firm Is DBE/WBE

	Straight Direct Labor Amount	Straight Overhead Rate	Straight Overhead Amount	Overtime Direct Labor Amount	Overtime Overhead Rate	Overtime Overhead Amount	Profit Rate	Profit Amount	Fixed Fee N/A	Lump Sum N/A	Mileage Rate \$/mile	Direct Expense Amount	Sub Consultant Amount	TOTALS
Contract Values:														
Original Contract	0.00	0.0000%	0.00	0.00	0.0000%	0.00	0.0000%	0.00	0.00	0.00	0.00	0.00	0.00	
Mod #1														
Mod #2														
Mod #3														
Mod #4														
Mod #5														
Mod #6														
Mod #7														
Mod #8														
Mod #9														
Mod #10														
Mod #11														
Mod #12														
Mod #13														
Mod #14														
Mod #15														
Mod #16														
Mod #17														
Mod #18														
Mod #19														
Mod #20														
Mod #21														
Mod #22														
Mod #23														
Mod #24														
Mod #25														
Contract Totals				•										
Previously Invoiced Totals														
Current Invoice Totals														
Contract Balance														

S	n	^	^		-2	0	
	88	<b>C</b>	c	L		u	

Invoice Date:

#### **Maine Department of Transportation - Standard Invoice**

DIRECT LABOR DETAIL

Consultant Name:	me:	э:			
Consultant Federal ID #:	) #:	<b>#</b> :			
Consultant Invoice Number:	oer:	r:			
Invoice Period:	iod:	d:			
Contract Number:	oer:	r:			
Contract Award Date:	ate:	э:			
Contract Completion Date:	ate:	э:			

Consultant Project #:
MaineDOT PIN:
Federal Project #:
Project Title/Location:

#### Summary of Direct Labor:

			,				ī			•
	Individual		MaineDOT	Stra	ight Direc	t Labor	Over	time Direc	t Labor	Total
NAME	marriada	TITLE	PIN	THIS INVOICE				THIS INVOICE	EΕ	THIS INVOICE
				Time Unit	Rate	Amount	Time Unit	Rate	Amount	Amount
Name 1 Name 2 Name 3 Name 4	Title 1 Title 2 Title 3 Title 4		000000.00	0.000	0.0000	Amount	0.000	0.0000	Amount	Amount
	Total	Direct Labor =								
<u> </u>	Total	Direct Labor =								

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Invoi	Ce	Dat	φ.

#### **Maine Department of Transportation - Standard Invoice**

#### SUB CONSULTANT DETAIL

### Summary of DBE/WBE Participation:

Contract Number: Contract Award Date: Contract Complete Date:

	Amounts This Invoice								
DBE/WBE - yes/no =>								Invoice	Invalaa
Subconsultants #1 - #7 MaineDOT PIN	Sub #1	Sub #2	Sub #3	Sub #4	Sub #5	Sub #6	Sub #7	Sub Total DBE/WBE Subs Only #1-7	Invoice Sub Total All Subs #1-7
000000.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
INVOICE TOTALS #1 - #7									
Previously Invoiced									
Subcontract Amount									
Subcontract Balance									
			<u> </u>		Invoice Total	s Subconsul	tants #1- #14		

Total Contract Amount =

				of	
•	•				

**Invoice Date:** 

#### **Maine Department of Transportation - Standard Invoice**

#### SUB CONSULTANT DETAIL continued

Consultant Project #:
 MaineDOT PIN:
 Federal Project #:
 Project Title/Location:

Consultant Name:
Consultant Federal ID #:
Consultant Invoice #:
Invoice Period:
Contract Number:
Contract Award Date:

Contract Complete Date:

#### Summary of DBE/WBE Participation:

DBE/WBE - yes/no =>								Invoice	Invoice
Subconsultants #8 - #14 MaineDOT PIN	Sub #8	Sub #9	Sub #10	Sub #11	Sub #12	Sub #13	Sub #14	Sub Total DBE/WBE Subs Only #8-14	Sub Total All Subs #8-14
00000.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
INVOICE TOTALS #8 - #14									
Previously Invoiced									
Subcontract Amount									
Subcontract Balance									

Maine Department	t of Transportation	- Standard Invoice
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Invoice Date:

PIN DETAIL

Overhead-Profit/Fee-Expenses

Consultant Name:
Consultant Federal ID #:
Consultant Invoice #:
Invoice Period:
Contract Number:
Contract Award Date:
Contract Complete Date:

Consultant Project #: MaineDOT PIN: Federal Project #: Project Title/Location:

				<= Labor + OH + Profit/Fed			rofit/Fee	Direct Expenses =>										
MaineDOT PIN	Federal Project Number	Town Name(s)		Straight Direct Labor Amount	Straight Overhead Amount	Overtime Direct Labor Amount	Profit % or % Compl	Fee			Amount	Travel	Postage Delivery Printing	Phone FAX	Other	Direct Expense Amount	Sub Consultant Amount	PIN Total This Period
000000.00			000/xxx							0.00								
						1			-									<u> </u>
																		1
																		1
																		<b> </b>
									-									
						1												
																		1
						1			-									<u> </u>
									-									
									-									
						1												
																		1
																		1
																		1
		TOTAL INIVOICE AMOU	INITO						1									
	TOTAL INVOICE AMOUNTS => (Includes Sheet 5b if used)																	

Invoice Direct Labor Totals Above Match
Those on Sheet 3 of 5 Direct Labor

Invoice Sub Consultant Total Above Matches
Total on Sheet 4 of 5 Sub Consultant

## Sheet 5b of 5

**Additional PIN Detail** 

				<= Labor + OH + Profit/Fee					rofit/Fee	Direct Expenses =>									
MaineDOT PIN	Federal Project Number	Town Name(s)	Fun/Act Coding	Straight Direct Labor Amount	Straight Overhead Amount	Overtime Direct Labor Amount	Overtime Overhead Amount	Profit % or % Compl	Profit or Fee Amount	Number	Mileag Rate		Travel	Postage Delivery Printing	Phone FAX	Other	Direct Expense Amount	Sub Consultant Amount	PIN Total This Period

Fee/Profit Rate	Mileage Rate	Yes/No
0.0000%	\$0.00	
0.0000%	\$0.00	Yes
0.0000%	\$0.00	No
0.0000%	\$0.00	
0.0000%	\$0.00	
0.0000%	\$0.00	
0.0000%	\$0.00	
0.0000%	\$0.00	
0.0000%	\$0.00	
0.0000%	\$0.00	
0.0000%	\$0.00	
0.0000%	\$0.00	
0.0000%	\$0.00	
0.0000%	\$0.00	
0.0000%	\$0.00	
0.0000%	\$0.00	
0.0000%	\$0.00	
0.0000%	\$0.00	
0.0000%	\$0.00	
0.0000%	\$0.00	
0.0000%	\$0.00	
0.0000%	\$0.00	
0.0000%	\$0.00	
0.0000%	\$0.00	
0.0000%	\$0.00	
0.0000%	\$0.00	
0.0000%		